LOUISIANA QUALITY INNOVATION GRANTS Second Grant Cycle

Louisiana Department of Health & Hospitals Office of Aging and Adult Services December 9 & 10, 2013

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What is the purpose of the grant?

The purpose of the grant is to present a means of enhancing the environment in your nursing home for your residents, staff and visitors by targeting improvement in resident life and care.

What grants were funded in the first cycle?

- 45 grants were submitted.
- 12 grants were approved for funding.
- Total funding was \$200,000.
- Grants ranged from \$5,000 to \$19,500.
- 8 grants were for the It's Never 2 Late program.

Funded Grants--First Grant Cycle Cont.

Other grants included:

- My InnerView, resident and family satisfaction program
- Perfect Pitch, resident centered musical program
- The Real Food First Snack Program
- Theater Room/Media Center

What requirements must grants meet?

- Projects must benefit nursing home residents.
- Other facilities must be able to duplicate projects.
- Projects must be affordable.
- Goals of the project must be clearly stated and be measurable.
- Quality of care and quality of life projects will be considered.
- Projects must be sustainable beyond the grant period.

The Ideal

Advancing Excellence Goal (desired, but not required)



QAPI (will be required)



Quality Innovation Project

What uses of CMP funds are prohibited?

- Funds can not be used to pay for capital improvements.
- Funds can not be used to pay for salaries.
- Funds can not be used to pay for services or supplies that are already the responsibility of the nursing home.

Completing the CMS Application

- Pay attention to DHH variations from the CMS application (e.g., multi-year projects).
- Application and supporting documents must not exceed 20 pages.
- For all <u>appendices</u>--
 - use Times New Roman, 12 point
 - include the nursing home name on each page
 - include page numbers on all documents

Completing CMS Application Cont.: Funding Section-(page 3)

- Do not request more than \$19,500. \$19,500 is the maximum allocation per grant.
- Itemize all expenses consistent with DHH budget (see DHH budget form and completion guide).
- Clearly state the total amount of the project and the amount you are requesting (consistent with last page of the DHH budget form).
- If appropriate, add the statement "Facility will pay for all expenses over the amount approved in the grant."

More Application Requirements

- For grants that will use trainers, include:
 - Resume
 - Other means of establishing qualifications (brochures, on-line descriptions)
- For grants that will use a contractor, include:
 - A copy of the proposed contract
 - A resume or other means of establishing qualifications

Application Mistakes to Avoid: DHH Budget Form

Expenses placed in the wrong budget category (refer to "Guide to Completing the DHH Budget Form").

Ex	pen	ses
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- Shipping
- Licensing/Subscription
- Training
- Taxes
- Certification
- Installation

Budget Category

- (13) Operating Cost
- (13) Operating Cost
- (15) Professional Cost
- (17) Indirect/Admin Cost
- (17) Indirect/Admin Cost
- (17) Indirect/Admin Cost

Application Mistakes to Avoid: DHH Budget Form Cont.

- First Section of the last page left blank.
 - Hit "Total Cost." (This will auto-populate the fields.)
- On the last page, "Total Cost-Requested from DHH":
 - Exceeds the maximum allowed in the grant.
 - Is not the same amount requested in the application.

Submitting the Application

- Submit the CMS application and the DHH budget <u>electronically</u> (as email attachments) by <u>January 17, 2014</u> <u>to Ed Smith.</u>
- Follow-up with Ed Smith if you do not receive a confirmation of receipt of your application within five business days.

How are grants selected?

- A Review Committee will select from among projects that meet criteria and decide which merit consideration for funding.
- Selected projects will be forwarded to CMS for approval.

What happens once a project has been approved?

- Successful applicants will be asked to enter into a Cooperative Endeavor Agreement (CEA).
- The CEA will begin on July 1, 2014 and will end on June 30, 2015.
- The CEA will include the activities described in the grant application.

If your project is approved...

- Sign and return the CEA sent to you by Office of Aging and Adult Services staff.
 - The CEA will include a HIPAA form that your signature acknowledges agreement to.
- Submit a W-9.

Submit a Board Resolution.

Notes about Board Resolutions

- The Board Resolution must be signed and dated before the CEA is signed and dated.
- The full name of the person authorized to sign must be used.
- The name of the legal entity used in the contract must match the name of the legal entity named in the Board Resolution.
- The Board Resolution must be specific to the contract.

How will the grant be monitored?

- Nursing homes will submit four quarterly progress reports (quarterly report form).
- Onsite visits will be made by OAAS staff.
- Progress of the project will be compared to the Scope of Activities as defined in the CEA.
- Progress of the project will be compared to the approved budget.

How are the grant funds disbursed?

- This is a reimbursement grant (funds will not be given lump sum upon approval).
- Typically, grant payments will be made in four quarterly installments upon receipt of the quarterly reports that have been approved by Ed Smith.
 - 50% of the total approved grant
 - 12%
 - 12%
 - 26%

IF YOU NEED ADDITIONAL INFORMATION

• For additional grant application information (see FAQ's).

Direct all inquiries to:

Ed Smith at

Edward.Smith2@la.gov

225-219-4435

Information about Advancing Excellence and QAPI

ADVANCING EXCELLENCE IN AMERICA'S NURSING HOMES

• The Advancing Excellence in America's Nursing Homes Campaign was developed to assist all stakeholders of long term care supports and services to achieve the highest practical level of physical, mental and psychological well-being for all individuals receiving long term care services.

What Are the Goals of the Advancing Excellence Campaign?

- Advancing Excellence has selected nine goals and developed new resources to help you get started on your quality improvement projects:
 - Process Goals:
 - Consistent Assignment
 - Hospitalizations
 - > Person-Centered Care
 - Staff Stability

Advancing Excellence Goals Cont.

- Clinical Outcome Goals
 - > Infections
 - > Medications
 - ➤ Mobility
 - > Pain
 - Pressure Ulcers

QAPI

Quality Assurance and Performance Improvement

• The Affordable Care Act replaces QA with QAPI effective 2014 (tentative).

 QAPI is a data driven, proactive approach to improving the quality of life, care and services in the nursing home.

QAPI Cont.

FIVE ELEMENTS OF QAPI:

- Design and Scope
- Governance and Leadership
- Feedback, Data Systems and Monitoring
- Performance Improvement Projects (PIP)
- Systematic Analysis and Systemic Action

QAPI Recommended Reading

- QAPI at a Glance: A Step by Step Guide to Implementing QAPI in Your Nursing Home
- "Getting Better All of the Time" Cobble Hill Health Center and the Isabella Geriatric Center
- The CMS QAPI Guide: What You Need To Know – Ohio KePro, www.ohopkepro

QAPI Recommended Reading Cont.

- Learning and Action Network: Resources and Tools for CMS Initiatives, April 24, 2013, EQ-Health Solutions
- CMS, National Quality Care Collaborative, "Advancing Excellence in Nursing Homes," Person Centered Webinar, May 2, 2013

QAPI –QIG Case Study

LOCATION:

DATE INITIATED:

Happy Days Nursing Home July 1, 2014

Happy Days, LA

PIP TITLE

Improve Resident Consumption of Vegetables

STATEMENT OF THE PROBLEM

Daily meal consumption audits have revealed that residents on solid food diets are leaving an average of 50% or more of their lunch/dinner vegetables on their plate.

RATIONALE FOR CONDUCTING THE PIP

The nursing home wants to ensure that all residents who are on solid food diets eat the daily recommended proportion of vegetables to maximize the health benefits derived from vegetables.

Health benefits include, but are not limited to:

- Weight management
- Level of activity (stamina)
- Quantity and quality of sleep
- Psychological disposition

GOALS AND OBJECTIVES

 Residents whom are on regular diets should eat 75% of their daily vegetables.

PROJECT ACTIVITIES

 Management performed a root cause analysis using the "Five Why Method."

Root Cause Analysis:

1. Why do residents only eat 50% of their vegetables?

Because they don't like them.

Root Cause Analysis:

2. Why don't they like the vegetables?

Because they are not cooked properly and don't offer variety.

Root Cause Analysis:

3. Why are they not cooked properly and don't offer variety?

Vegetables are canned rather than fresh and residents are not asked for their input.

Root Cause Analysis:

4. Why are vegetables canned and why aren't residents asked for their input?

Management believes that fresh vegetables are too costly and resident input is too time consuming.

ACTION PLAN/ RESDIENT & FAMILY INPUT

Management clearly underestimated the resident's concerns about vegetables. They have decided to interview residents and their families to formulate a plan of correction.

RESEARCH RESULTS

- The results of the resident interviews indicated that residents wanted a salad bar.
- In evaluating salad bar systems that provided both choice and efficiency, management concluded that the best system is the mobile salad bar.

PLAN APPROVAL

- At a resident council meeting, management presented their interview findings and provided the residents with a picture of a mobile salad bar.
- The residents unanimously endorsed the purchase of a mobile salad bar.

PLAN APPROVAL CONT.

- Management presented its findings to the QAPI Committee. The Committee voted to proceed with applying for a Quality Innovation Grant for two mobile salad bars.
- Administration received approval from the Board of Directors to proceed with the grant request.
- Administration submitted a QIG grant for \$18,000 for two mobile salad bars.

EVALUATION

 Once the salad bars have been placed in operation, the Dietary staff will record intake of vegetables on a daily basis per meal.

 Dietary staff will document any comments made by the residents as it pertains to the vegetables that were served to them.

EVALUATION CONT.

• Monthly the dietician will review the amount of vegetables eaten by each resident. If documentation indicates that a resident is not eating at least 75% of her/his vegetables, the dietician will meet with the resident to determine reasons that the vegetables have not been eaten.

QAPI/QIG Case Study Cont. FOLLOW-UP

 Results of the project will be reported at the quarterly QAPI Committee meeting.

 Quarterly progress reports will be submitted to the OAAS.